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05514

7590

02/18/2004

FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA

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(Signature (Date

APPLICATION NO.

FILING DATE

MED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

09/892,409

06/28/2001

Hiroyuki Takahara

35.G2296 DI

2813

TITLE OF INVENTION: IMAGE SENSOR UNIT AND IMAGE READER USING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$300	\$1630	05/18/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
BROWN, KHALED		2877		355-067000	•		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			names of agents Of firm (hav agent) an	inting on the patent front page of up to 3 registered patent a R, alternatively, (2) the name ing as a member a registered d the names of up to 2 regis or agents. If no name is listed inted.	attorneys or 1 FITZP: of a single attorney or 2 HARPE tered patent	ATRICK, CELLA, R & SCINTO	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE

CANON KABUSHIKI	KAISHA	TOKYO,	JAPAN				
Please check the appropriate assignee	category or categories	(will not be printed on the patent);	individual Dec	orporation or other private group entity	☐ government		
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